

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		8-30-00
O.I.P.E. CLASSIFIER		71639	9-5-00
FORMALITY REVIEW			9/29/00
RESPONSE FORMALITY REVIEW			11-9-00

### INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
-	(Through numeral)..... Canceled	A	..... Appeal
+	..... Restricted	O	..... Objected

Claim	Date
1	2050201
2	0013016
3	01020203
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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